

Fill in this information to identify your case:

Debtor 1	Wallace Ford, Jr.
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA
Case number (If known)	1:20-bk-01668

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2. Yes. Fill out this information for
each dependent.....

Do not state the
dependents names.

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

Son	13 years	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **1,395.00**

Your expenses

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	0.00
4b. \$	17.00
4c. \$	40.00
4d. \$	0.00
5. \$	0.00

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: _____	6a. \$ <u>550.00</u> 6b. \$ <u>160.00</u> 6c. \$ <u>265.00</u> 6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	7. \$ <u>715.00</u>
8. Childcare and children's education costs	8. \$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>60.00</u>
10. Personal care products and services	10. \$ <u>80.00</u>
11. Medical and dental expenses	11. \$ <u>380.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>225.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>216.67</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: _____	15a. \$ <u>74.00</u> 15b. \$ <u>490.00</u> 15c. \$ <u>600.00</u> 15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: _____ 17d. Other. Specify: _____	17a. \$ <u>1,072.29</u> 17b. \$ <u>359.90</u> 17c. \$ <u>0.00</u> 17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues	20a. \$ <u>0.00</u> 20b. \$ <u>0.00</u> 20c. \$ <u>0.00</u> 20d. \$ <u>0.00</u> 20e. \$ <u>0.00</u>
21. Other: Specify: <u>1/12 of Son's Catholic School Tuition</u>	21. +\$ <u>147.92</u>
22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>6,847.78</u> \$ \$ <u>6,847.78</u>
23. Calculate your monthly net income. 23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I. 23b. Copy your monthly expenses from line 22c above.	23a. \$ <u>7,000.00</u> 23b. -\$ <u>6,847.78</u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>152.22</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain here: 1. Debtor suffers from Type 2 diabetes and must pay approximately \$650.00 every two months for his prescription, Trulicity. He expects his co-pays and medical expenses will increase in the future. 2. Debtor must pay for his own health and medical insurance premiums, which will only increase over time. 3. Debtor was involved in an automobile accident, which resulted in his monthly premiums rising to \$600.00 per month. These will decrease over time as he maintains a safe driving record.